## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

64859 CCD

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                  |                   |                                  |                  |     |                     | SMALL ENTITY TYPE      |    |                     | OTHER THAN<br>OR SMALL ENTITY |  |  |
|---|--|---|------------------|-------------------|----------------------------------|------------------|-----|---------------------|------------------------|----|---------------------|-------------------------------|--|--|
| TOTAL CLAIMS  |  |   | 24               |                   | 0, 00                            |                  | 1   | RATE                | FEE                    |    | RATE                | FEE                           |  |  |
| FOR   |  |   | NUMBER FILED     |                   | NUMBI                            | R EXTRA          |     | BASIC FEE           | 355.00                 | OR | BASIC FEE           | 710.00                        |  |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 24 minus 20=     |                   | · 4                              |                  |     | X\$ 9=              |                        | OR | X\$18=              | 72                            |  |  |
| IND   | EPENDENT CL                                    | AIMS                                      | └( minus 3 =     |                   | * (                              |                  |     | X40=                |                        | OR | X80=                | 80                            |  |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                  |                   |                                  |                  |     | +135=               |                        | OR | +270=               |                               |  |  |
| * If the difference in column 1 is less than zero, enter "0" in o   |  |   |                  |                   |                                  | olumn 2          | l   | TOTAL               |                        | OR | TOTAL               | 862                           |  |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)   |  |   |                  |                   |                                  |                  |     | SMALL E             | NTITY                  | OR | OTHER<br>SMALL      |                               |  |  |
| AMENDMENT A   | ,  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUN<br>PRÉVI      | HEST<br>MBER<br>OUSLY<br>FOR     | PRESENT<br>EXTRA |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE        |  |  |
|   | Total  | *   | Minus            | **                |                                  | =                |     | X\$ 9=              |                        | OR | X\$18=              |                               |  |  |
| AME   | Independent                                    | *   | Minus            | ***               | T OLAMA                          | =                |     | X40=                |                        | OR | X80=                |                               |  |  |
|   | FIRST PRESE                                    | NTATION OF MU                             | JULIPLE DEF      | PENDEN            | II CLAIM                         |                  |     | +135=               |                        | OR | +270=               |                               |  |  |
|   |  |   |                  |                   |                                  |                  |     | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                               |  |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                  |                   |                                  |                  |     |                     |                        |    |                     |                               |  |  |
| AMENDMENT B   | ·  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | å                | NUI<br>PREV       | HEST<br>MBER<br>HOUSLY<br>D FOR  | PRESENT<br>EXTRA |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE        |  |  |
|   | Total  | *   | Minus            | **                |                                  | =                |     | X\$ 9=              |                        | OR | X\$18=              |                               |  |  |
| A PAR   | Independent                                    | *****                                     | Minus            | ***               |                                  | -                |     | X40=                |                        | OR | X80=                |                               |  |  |
| L   | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DEI      | PENDEN            | II CLAIM                         |                  |     | +135=               |                        | OR | +270=               |                               |  |  |
| ,   | •  | • .                                       | *:               |                   |                                  |                  |     | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                               |  |  |
|   |  | (Column 1)                                |                  | (Col              | umn 2)                           | (Column 3)       |     | ADDIT. FEET         |                        | ٥  | ADDIT. I EL         |                               |  |  |
| AMENDMENT C   |  | CLAIMS REMAINING AFTER AMENDMENT          | 0                | HIG<br>NU<br>PRE\ | HEST<br>MBER<br>(IOUSLY<br>D FOR | PRESENT<br>EXTRA |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE        |  |  |
| MOS.  | Total  | *   | Minus            | **                |                                  | =                |     | X\$ 9=              |                        | OR | X\$18=              | 7                             |  |  |
| AME   | Independent                                    | *   | Minus            | ***               |                                  | =                |     | X40=                |                        | OR | X80=                |                               |  |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                   |                                  |                  |     | +135=               |                        | OR | +270=               |                               |  |  |
|   | If the entry in colu                           | ımn 1 is less than t                      | the entry in col | umn 2, wi         | ite "0" in co                    | olumn 3.         | ~ # | TOTAL               |                        | {  | TOTAL               |                               |  |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                  |                   |                                  |                  |     |                     |                        |    |                     |                               |  |  |